SM

'84 US OPEN

AUGUST 28 — SEPTEMBER 9

SERIES RENEWAL APPLICATION MUST BE RETURNED BY APRIL 20th

NAME Vinnie Weiner

FIRM PHILIP MORRIS

ADDRESS 120 Park Avenue

CITY New York STATE NY ZIP 10017

BUSINESS PHONE (212) 880-3254 HOME PHONE

4 LOWER PROMENADE SERIES PLAN SEAT(s) @ $350 PER SEAT $ 1400.00

_____ U.S. OPEN CLUB PASS BOOKS @ $25 PER BOOK $ _____
(Each person must have a pass for admittance)

_____ PARKING PASS BOOK @ $100.00 PER BOOK $ _____
(Book will include day and nite parking passes)

SEAT LOCATION(s) _____ TOTAL $ _____

Make checks payable to: 1984 U.S. OPEN and mail to: PHILIP MOLITE
1984 U.S. OPEN TENNIS CHAMPIONSHIPS
P.O. Box 1984
Fresh Meadows, N.Y. 11365 Telephone: 271-5100

U.S. Open Tennis Championships will use its best efforts to allocate Series Seat Ticket Subscriptions in accordance with renewal, previous request or this application, but retains the right to limit the number and determine location of Series Seat Ticket Subscriptions. Prior subscribers will receive preferential treatment.

No transfer or resale of Series Seat Ticket subscriptions or tickets purchased thereunder is permissible, and automatically voids subscription renewal of this application and results in rescission of Series Seat Ticket subscriptions granted hereunder by return of subscription price less usage as defined below.

Upon receipt of tickets purchased hereunder, risk of loss or theft of said tickets shall pass to subscriber. U.S. Open shall not be obligated to admit subscriber to events unless tickets delivered hereunder are presented at such time.

Tickets purchased hereunder are a personal license revocable at the sole discretion of U.S. Open. U.S. Open retains the right at any time to reclaim seats by refunding balance of Series Seat Ticket Subscription price (full price less event usage at established ticket seat price) because of improper conduct by subscriber (including guests) or non-usage as determined by U.S. Open in its sole discretion. Series subscription tickets are otherwise not refundable or exchangeable.

In case of rain or other cancellation of play, there will be neither refunds nor exchange of tickets.

SIGNATURE

For Office Use Only

CARD ☐ COMPANY CHECK ☐ CHECKED BY _____ DATE _____
CHARTED ☐ PERSONAL CHECK ☐
CIRCLED ☐ OTHER _____ CERTIFIED # _____

ACCT. NO.

2040925969

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